SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 10/11
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 28a 28b	24 25 26 28c 29 30
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) St Jude Medical Political Action Committee				
Full Name (Last, First, Middle Initial) Mike Thompson for Congress			Transaction ID: Date of Disbursen	
Mailing Address 236 Massachusetts Ave. I Suite 603	NE		10 / 27	2009
Washington I	State Zip Code DC 20002		Amount of Each D	isbursement this Period
Purpose of Disbursement Candidate Name		011		1000.00
Mike Thompson Office Sought: House Disburser	nent For:	Category/ Type		
X Senate President State: CA District:	Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Nelson 2012			Transaction ID: Date of Disbursen	
Mailing Address 420 C Street NE			10 M / 27 / 2009	
	State Zip Code 20002		Amount of Each D	isbursement this Period
Purpose of Disbursement		011		2000.00
Candidate Name Ben Nelson		Category/ Type		
Office Sought: House Disburser X Senate President State: NE District:	nent For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) ROGERS FOR CONGRESS			Transaction ID: Date of Disbursen	nent
Mailing Address PO Box 581 Post Office Box 581			09 / 24	2009
	State Zip Code MI 48116		Amount of Each D	isbursement this Period
Purpose of Disbursement Candidate Name O11 Category/			1000.00	
Mike Rogers	and Fam.	Category/ Type		
Office Sought: House Disburser X Senate President State: MI District:	nent For: Primary General Other (specify) ▼			
State: IVII DISTRICT. SUBTOTAL of Disbursements This Page (optional)				4000.00
TOTAL This Period (last page this line number only).				